

| | in this informati | tion to intentifican | | | | | | | | | |
|--|--|----------------------------------|---------------|---|--|-------------|------------|----------------|-------------------------------|------------------|--|
| FIII | in this informat | tion to identify yo | ur case: | | | | | | | | |
| Debtor 1 Michelle Y. Gillyard | | | | | Ch | eck if this | | | | | |
| Doh | tor 2 | | | | | | | ended filing | ving postpetition cha | ntor | |
| | ouse, if filing) | | | | | | | | the following date: | piei | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA | | | | | | | | - D () 0 0 0 (| | | |
| Unit | ed States Bankr | uptcy Court for the: | EASTE | | MM / L | D / YYYY | | | | | |
| Cas | e number 16 | 5-13230 | | | | | | | | | |
| (If kı | nown) | | | | | | | | | 12/15 ct e | |
| O ₁ | fficial Fo | rm 106J | | | | | | | | | |
| | | J: Your E | Exner | 1606 | | | | | | 12/15 | |
| | | | | If two married people a | re filing together, bo | oth are e | qually res | sponsible fo | or supplying correct | | |
| info | ormation. If m | | eded, atta | ch another sheet to this | | | | | | | |
| Par | | ibe Your House | hold | | | | | | | | |
| 1. | Is this a join | nt case? | | | | | | | | | |
| | ■ No. Go to line 2. | | | | | | | | | | |
| | ☐ Yes. Doe | s Debtor 2 live i | n a separ | ate household? | | | | | | | |
| | □ No | _ | | | | | | | | | |
| | □ Ye | es. Debtor 2 mus | t file Offici | al Form 106J-2, Expenses | s for Separate House | hold of D | ebtor 2. | | | | |
| 2. | Do you have | e dependents? | □ No | | | | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | De age | pendent's | Does dependent live with you? | | |
| | Do not state | the | | | | | | | □ No | | |
| | dependents | | | | Daughter | | 9 | | ■ Yes | | |
| | | | | | | | | | □ No | | |
| | | | | | Son | | 12 | | ■ Yes | | |
| | | | | | | | | | □ No | | |
| | | | | | Daughter | | 17 | | Yes | | |
| | | | | | | | | | □ No | | |
| 3. | Do your exp | enses include | | | | | | | ☐ Yes | | |
| ٥. | | f people other th | nan | No | | | | | | | |
| | yourself and | d your depender | nts? ⊔ | Yes | | | | | | | |
| Par | t 2: Estima | ate Your Ongoir | ng Month | y Expenses | | | | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | | | | |
| Incl | lude expense | s paid for with n | on-cash | government assistance i | if vou know | | | | | | |
| the | value of such | n assistance and | | cluded it on Schedule I: | | | | Valueava | | | |
| (Off | ficial Form 10 | 6I.) | | | | | _ | Your expe | enses | | |
| 4. | The rental or home ownership expenses for your residence. payments and any rent for the ground or lot. | | | | nclude first mortgage | | \$ | | 650.00 | | |
| | | led in line 4: | | | | | | | | | |
| | 4a Basta | etato tavos | | | | 40 | ¢ | | 0.00 | | |
| | | estate taxes rty, homeowner's | . or renter | 's insurance | | 4a. 4b. | · — | | 0.00 0.00 | | |
| | • | • | | upkeep expenses | | 4c. | · — | | 50.00 | | |
| | 4d. Home | owner's associati | on or con | dominium dues | | 4d. | | | 0.00 | | |
| 5. | Additional n | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. | \$ | | 0.00 | | |

| Debtor 1 | Michelle | Y. Gillyard | Case nu | mber (if known) | 16-13230 | | | | | |
|------------------------|---|--|--------------------|-------------------|--------------------------------|--|--|--|--|--|
| | 141 | | | | | | | | | |
| 6. Utili 6a. | ities: | heat, natural gas | e, | a. \$ | 250.00 | | | | | |
| 6b. | | | | α. φ D. \$ | _ | | | | | |
| | | ver, garbage collection | | · | 100.00 | | | | | |
| 6c. | | e, cell phone, Internet, satellite, and cable services | | c. \$ | 125.00 | | | | | |
| 6d. | Other. Spe | | | d. \$ | 0.00 | | | | | |
| . Foo | d and house | ekeeping supplies | | 7. \$ | 300.00 | | | | | |
| . Chil | ldcare and c | hildren's education costs | 8 | 3. \$ | 50.00 | | | | | |
| Clot | thing, laund | ry, and dry cleaning | ę | 9. \$ | 28.00 | | | | | |
| O. Pers | sonal care p | roducts and services | 10 | D. \$ | 25.00 | | | | | |
| | | ntal expenses | 1. | 1. \$ | 25.00 | | | | | |
| | | Include gas, maintenance, bus or train fare. | | | | | | | | |
| | not include ca | | 12 | 2. \$ | 225.00 | | | | | |
| | | clubs, recreation, newspapers, magazines, and books | 13 | 3. \$ | 0.00 | | | | | |
| | | ributions and religious donations | | 1. \$ | 0.00 | | | | | |
| | ırance. | induction and rongicuo denductions | · | • | 0.00 | | | | | |
| | | surance deducted from your pay or included in lines 4 or 20. | | | | | | | | |
| | . Life insura | | 15a | a. \$ | 0.00 | | | | | |
| | . Health ins | | | o. \$ | 0.00 | | | | | |
| | . Vehicle ins | | | c. \$ | | | | | | |
| | | | | · <u> </u> | 122.00 | | | | | |
| | | rance. Specify: | | d. \$ | 0.00 | | | | | |
| | | clude taxes deducted from your pay or included in lines 4 or 20. | | | | | | | | |
| | cify: | <u> </u> | 16 | 5. \$ | 0.00 | | | | | |
| | | ease payments: | | • | | | | | | |
| | . , | ents for Vehicle 1 | | a. \$ | 423.00 | | | | | |
| 17b. | . Car payme | ents for Vehicle 2 | 17t | o. \$ | 0.00 | | | | | |
| 17c. | . Other. Spe | ecify: | 170 | c. \$ | 0.00 | | | | | |
| 17d. | . Other. Spe | ecify: | 170 | d. \$ | 0.00 | | | | | |
| 3. You | r payments | of alimony, maintenance, and support that you did not repo | ort as | | | | | | | |
| | | your pay on line 5, Schedule I, Your Income (Official Form 1 | 1 06I). 18 | 3. \$ | 0.00 | | | | | |
| 9. Oth | er payments | s you make to support others who do not live with you. | | \$ | 0.00 | | | | | |
| Spe | cify: | | 19 | 9. | | | | | | |
|). Oth | er real prop | erty expenses not included in lines 4 or 5 of this form or on | Schedule I: | Your Income. | | | | | | |
| 20a. | . Mortgages | s on other property | 208 | a. \$ | 0.00 | | | | | |
| 20b. | . Real estat | e taxes | 201 | o. \$ | 0.00 | | | | | |
| 20c. | . Property, h | nomeowner's, or renter's insurance | 200 | c. \$ | 0.00 | | | | | |
| | | ce, repair, and upkeep expenses | 200 | d. \$ | 0.00 | | | | | |
| | | er's association or condominium dues | | e. \$ | 0.00 | | | | | |
| | | or a accordation or condominating duces | | τ. φ 1. +\$ | | | | | | |
| i. Oth | er: Specify: | | | ı. † ֆ | 0.00 | | | | | |
| 2. Cald | culate vour | monthly expenses | | | | | | | | |
| | . Add lines 4 | • | | \$ | 2,373.00 | | | | | |
| | | 2 (monthly expenses for Debtor 2), if any, from Official Form 10 | 6.J-2 | \$ | 2,370.00 | | | | | |
| | | | | · | 0.070.00 | | | | | |
| 22c. | . Add line 22a | a and 22b. The result is your monthly expenses. | | \$ | 2,373.00 | | | | | |
| 3 Cald | culate vour | monthly net income. | | L | | | | | | |
| | | 12 (your combined monthly income) from Schedule I. | 23. | a. \$ | 3,028.04 | | | | | |
| | | , | | | | | | | | |
| 230. | . Copy your | monthly expenses from line 22c above. | 231 | D\$ | 2,373.00 | | | | | |
| 230 | Subtract v | our monthly expenses from your monthly income | | | | | | | | |
| ∠3C. | | our monthly expenses from your monthly income. | 230 | 2. \$ | 655.04 | | | | | |
| | rne result | is your monthly net income. | 200 | · L · | 333.37 | | | | | |
| 4 Do | vou expect o | an increase or decrease in your expenses within the year of | fter you file th | is form? | | | | | | |
| | Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a | | | | | | | | | |
| | | terms of your mortgage? | ot your mortgag | c payment to more | dece of decircuse because of a | | | | | |
| | | | | | | | | | | |
| | | Fundate trans. | | | | | | | | |
| □Y | res. | Explain here: | | | | | | | | |